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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>		Attorney Docket No. 5544/306	
		First Inventor Terrance C. Anderson	
		Title FLAT-BOTTOMED RCLOSABLE PACKAGE WITH GUSSETS	
(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b))		Express Mail Label No. EV 256129689 US	
<b>APPLICATION ELEMENTS</b> See MPEP chapter 600 concerning utility patent application contents.		ADDRESS TO: MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	
1. <input checked="" type="checkbox"/> *Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and a duplicate for fee processing)		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table of Computer Program (Appendix)	
2. <input checked="" type="checkbox"/> Applicant claims small entity status. (See 37 CRF 1.27)		8. Nucleotide and/or Amino Acid Sequence Submission (If applicable, all necessary)	
3. <input checked="" type="checkbox"/> Specification Total Pages (15) (preferred arrangement set forth below) - Descriptive title of the invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure		a. <input type="checkbox"/> Computer Readable Copy b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper c. <input type="checkbox"/> Statements verifying identity of above copies	
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) Total Sheets (11)		<b>ACCOMPANYING APPLICATION PARTS</b>	
5. <input checked="" type="checkbox"/> Oath or Declaration a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) i. <input type="checkbox"/> <u>DELETION OF INVENTOR(S)</u> Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b).		9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement of Power of Attorney (when there is an assignee) 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input type="checkbox"/> Other: _____	
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76			
17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheets under 37 CFR 1.76: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application no.: _____ Prior application information: Examiner: _____ Group / Art Unit: _____ <b>For CONTINUATION or DIVISIONAL only:</b> The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.			
<b>18. CORRESPONDENCE ADDRESS</b>			
<input checked="" type="checkbox"/> Customer No. or Bar Code Label		34205 or <input type="checkbox"/> Correspondence address below (insert Customer No. or Attach bar code label here)	
Address Oppenheimer Wolff & Donnelly LLP 45 South Seventh Street, Suite 3300			
City	Minneapolis	State	Minnesota
Country	US	Telephone	612.607.7278
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		Fax	612.607.7100
		Registration No. (Attorney/Agent)	44,426
Signature			Date
			September 8, 2003

 22151 U.S. PTO  
 10/657784  
 09/08/03

09/08/03

15866 U.S. PTO

**FEE TRANSMITTAL****for FY 2003**

Patent fees are subject to annual revision.

Complete if Known

Application Number		
Filing Date		Herewith
First Named Inventor		Terrance C. Anderson
Examiner Name		
Group Art Unit		
TOTAL AMOUNT OF PAYMENT	\$501.00	Attorney Docket No.: 5544/306

METHOD OF PAYMENT				FEE CALCULATION (continued)			
1. <input checked="" type="checkbox"/> Authorized to charge indicated fees or credit				3. ADDITIONAL FEES			
Deposit Acct No. Name:	50-1901 <b>Oppenheimer Wolff &amp; Donnelly LLP</b>			Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
<input checked="" type="checkbox"/> Charge Any Add'l Fee Required Under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Applicant Claims Small Entity				1051	130	2051	65
				1052	50	2052	25
				1053	130	1053	130
				1812	2,520	1812	2,520
				1804	920*	1804	920*
				1805	1,840*	1805	1,480*
2. <u>Payment Enclosed:</u> Check <u>        </u> Credit <u>        </u>				1251	110	2251	55
1. BASIC FILING FEE				1252	410	2252	205
Large Fee	Small Fee	Fee description	Fee Paid	1253	930	2253	465
750	375	Utility filing fee	\$375.00	1254	1,450	2254	725
330	165	Design filing fee		1255	1,960	2255	985
520	260	Plant filing fee		1401	320	2401	160
750	375	Reissue filing fee		1402	320	2402	160
160	80	Provisional filing fee		1403	280	2403	140
SUBTOTAL (1)			\$375.00	1451	1,510	1451	1,510
2. EXTRA CLAIM FEES				1452	110	2452	55
Claims	20 - 20	Extra Claims	0	1453	1,300	2453	640
		Fee	18/9	1501	1,280	2501	640
		Fee Paid	\$0.00	1502	460	2502	230
Ind. Claims	6 - 3 =	3	84/42	1503	620	2503	310
		Fee	\$126.00	1460	130	1460	130
		Fee Paid	\$0.00	1807	50	1807	50
Multiple Dependent				1806	180	1806	180
		280/140	\$0.00	8021	40	8021	40
Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description		1809	740	2809	370
18	9	Claims in excess of 20		1810	740	2810	370
84	42	Independent claims in excess of 3		1801	750	2801	375
280	140	Multiple dependent claim		1802	900	1802	900
84	42	** Reissue independent claims over original patent		Other fee (specify) _____			
18	9	** Reissue claims in excess of 20 and over original patent		SUBTOTAL (3) \$0.00			
SUBTOTAL (2)			\$126.00				
**or number previously paid, if great; For Reissues, see above							

SUBMITTED BY		Complete (if applicable)	
Name	Registration No.:	Telephone: (612) 607-7	
Signature	Date: September 8, 2003		

UTILITY PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Terrance C. Anderson

Ser. No. :

Filed : Herewith

Title : FLAT-BOTTOMED RECLOSABLE  
PACKAGE WITH GUSSETS

Docket No : 5544/306

**CERTIFICATE OF EXPRESS MAIL**

EXPRESS MAIL Mailing Label Number: EV 256129689 US

Date of Deposit: September 8, 2003

I hereby certify that these papers and fee(s) are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and are addressed to the Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Paper(s) Enclosed:

- ☒ Certificate of Express Mail
- ☒ Postcard
- ☒ Fee Calculation Sheet
- ☒ Complete Patent Application
- ☒ Executed Declaration
- ☒ Eleven (11) sheets of drawings

By:



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